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SERIAL NUMBER 10/754,844	FILING OR 371(c) DATE 01/08/2004 RULE	CLASS 607	GROUP ART UNIT 3766	ATTORNEY DOCKET NO. P-10537.04
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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 10/262,046 10/02/2002 PAT 7,103,418

** FOREIGN APPLICATIONS *****

NONE 10/16/06 CHL

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/13/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 22	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allwance				
Verified and Acknowledged <u>Carl R. Layton</u> CHL Examiner's Signature Initials				

ADDRESS

27581

TITLE

Medical fluid delivery system

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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